

AFFIDAVIT ON APPLICATION FOR VOTER REGISTRATION

STATE OF HAWAII

- ☐ County of Hawaii
☐ County of Kauai
☐ County of Maui
☐ City and County of Honolulu

SS.

IMPORTANT: PRINT CLEARLY IN BLACK INK. FAILURE TO COMPLETE ALL ITEMS WILL PREVENT ACCEPTANCE OF THIS APPLICATION.

AFFIDAVIT NO.

(OFFICE USE ONLY)

I HEREBY SWEAR (OR AFFIRM) THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT:

1. SOCIAL SECURITY NUMBER* ____ - ____ - ____ - ____	2. DATE OF BIRTH ____ / ____ / ____ Month Day Year	3. PLACE OF BIRTH	4. TELEPHONE Home: _____ Business: _____
5. LAST NAME		First Name	Middle Initial(s)
6. RESIDENCE ADDRESS IN HAWAII (Must be completed, P.O. Box, R.R., S.R., are not acceptable)		Apt. No	City/Town Zip Code
7. MAILING ADDRESS IN HAWAII (Street address or P.O. Box)		City/Town	Zip Code
8. If no street/residence address, describe location of residence (Leave blank if #6 is completed)		City/Town	Zip Code
9. GENDER <input type="checkbox"/> Female <input type="checkbox"/> Male	10. ARE YOU A REGISTERED VOTER IN ANOTHER STATE? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", please complete the following: I was last registered to vote at: _____ in the county of _____ (Last Registered Address) (County) (State) (Zip Code) and hereby authorize cancellation of my previous voter registration.		

Read carefully, mark appropriate "Yes" or "No" box, and sign below.

I hereby swear (or affirm) that:

11A. FOR FEDERAL, STATE, and COUNTY ELECTIONS:

- a. I am a citizen of the United States of America ☐ Yes ☐ No
- b. I am at least 16 years of age. I understand that I must be 18 years old by election day to vote ☐ Yes ☐ No
- c. I am a resident of the State of Hawaii.
The residence stated in this affidavit is not simply because of my presence in the State, but that the residence was acquired with the intent to make Hawaii my legal residence with all the accompanying obligations therein ☐ Yes ☐ No

11B. FOR OFFICE OF HAWAIIAN AFFAIRS (OHA) ELECTIONS:

In addition to the qualifications in 11A, I am a "... descendant of aboriginal peoples inhabiting the Hawaiian islands which exercised sovereignty and subsisted in the Hawaiian islands in 1778, and which peoples thereafter have continued to reside in Hawaii..." (HRS §11-1) and desire to register to vote in OHA elections ☐ Yes

Signature _____ Date _____
(Applicant's signature or mark is required)

12. Witness Signature (Required only if applicant makes a mark)	Date
Address of Witness	Phone no. of witness

WARNING: ANY PERSON WHO KNOWINGLY FURNISHES FALSE INFORMATION MAY BE GUILTY OF A CLASS C FELONY, PUNISHABLE BY UP TO 5 YEARS IMPRISONMENT AND/OR \$10,000 FINE.

*Notice: Section §11-15 of the Hawaii Revised Statutes requires that a person registering to vote provide, under oath, his or her social security number, if any. An application lacking this information, therefore, will be denied. Pursuant to Section 7 of the federal Privacy Act (P.L. 93-579), be advised that this information may be released to government agencies for government purposes.

Office Use Only

13. I.D. No. E O 9 6	14. Location Code ____	15. Representative District/Precinct ____ / ____
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The office at which a person registers to vote is confidential. A person's declination to register to vote is also confidential and is used for voter registration purposes only (National Voter Registration Act of 1993).

03/98